On April 28, 2009, I introduced a motion to track data on how services are being delivered under the Katie A. Strategic Plan. The data has been collected since May 2009.

In our December 31, 2009 reports, we learned that from the time children are screened, to the time they actually receive a service, a child could wait, on average, a total of 40 days.

The Strategic Plan allows for a maximum of 60 days between screening and actual service. We are concerned that our average timeframe is nearing the 60-day timeframe and this is not acceptable.

On the short end, children are actually served in approximately 20 days. While we appreciate the efforts made by both the Departments of Children and Family Services and Mental Health, we believe we must ensure that children are provided services as soon as possible. Many of these children require medication, while we understand that many are seen immediately, it is my understanding that "immediate" is defined by 20 days. This is still too long a time frame to receive actual services and medication support.

	<u>MOTION</u>
Ridley-Thomas _	
Yaroslavsky _	
Knabe _	
Antonovich _	
Molina _	

We must make mental health services a priority for these most needy children and youth. We must operate based on a "child-centered" approach, versus asking our children to fit into our processes and protocols.

WE, THEREFORE, MOVE that the Chief Executive Office, Department of Mental Health and the Department of Children and Family Services report back to this Board on the meeting of February 2, 2010 about how we can significantly reduce the amount of time between screening and actual service by using a "Child-Centered" approach where our systems immediately go to the child. The "Child-Centered Approach" would allow for a child to be screened, assessed and evaluated by a mental health professional at the same time. The approach could provide a case plan and medication support immediately, if needed. Please include in your analysis a reevaluation of how we can provide the most efficient and effective services to this population.

WE, FURTHER, MOVE that the Department of Health Services be included in the development of a more efficient service model if Medical Hubs can provide a means to reduce the amount of time between screenings or service.

MMA/sf